

CLAIMS ONLY						Application Number 101825881	Filing Date			
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend				Indep
1										
2										
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18	1									
19		1								
20		1								
21	1									
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47		5								
48		5								
49										
50										
Total Indep										
Total Depend										
Total Claims										

11
151
162